## **EVERY CHILD IS PRECIOUS**

Making Kings County a better place one child at a time



# KINGS COUNTY CHILDREN and FAMILIES COMMISSION

### **Draft Strategic Plan**

**FEBRUARY 8, 2000** 

#### To comment on this draft plan:

Write to: Kings County Children and Families Commission

1400 West Lacey Blvd. Hanford, CA 93230

Call: (559) 582-3211 ext. 2373

E-mail: dohnstad@co.kings.ca.us

Website: http://Kings.ca.us/

Fax: (559) 585-8047

Public Hearing: February 18, 2000 at 3:30 p.m. in the Kings County

Multi-Purpose Room in the Kings County Administrative Building located at 1400 W. Lacey Blvd.

in Hanford.

## **EVERY CHILD IS PRECIOUS**

The following strategic plan is the result of hard work and dedication by the following individuals:

#### **Commissioners:**

Chair Alene Taylor, Chairman, Board of Supervisors
Chair Elect Peggy Montgomery, Deputy Director, Human Services Agency
Susan Elizabeth, Program Administrator, Alcohol and Other Drug
Mary Gallegos, Deputy Administrative Officer
Dr. Sheldon Minkin, Director, Public Health
Judy Rutan, Senior Program Manager, Human Services Agency
Dr. Gaylene Soloniuk
Erma Urias, Prevention Coordinator, Office of Education
Jerry Webster, Executive Director, Kings Community Action Organization, Inc.

#### **Community Representatives:**

Maria Albarron, Avenal Angel Carrillo, Kettleman City Elaine Chipman, Lemoore Peggy Fann, Armona Marina Martinez, Hanford Judy Newton, Special Needs Children Yolanda Rosas, Corcoran Daniel Ruff, Home Garden

#### **Service Providers:**

Joanne Eberle, Early Head Start, Kings Community Action Organization
Marj Froberg, Pediatric Nurse Practitioner Candidate
Mary Gonzales Gomez, Corcoran Unified School Dist. & Corcoran Hosp. Board
Judy Horn, Kings Partnership for Children
Kathy Palusko, RN/ESN, Director of Education Services, Central Valley Hospital
Sylvia Robinson, Hanford Elementary School District
Don Russell, Local Childcare Planning Council
Patty Scroggins, West Hills College
Jeanne Hagen Stoddard, Hanford Speech and Hearing
Gloria Villaneuva, Tachi-Yokut Early Learning Center
Al Vital, Educare

In addition to these Strategic Planning Committee members who took time out of their busy lives to participate in the planning process, the Commission wishes to recognize the contribution of all of the many community members who attended forums or roundtable discussions, completed surveys or otherwise provided their input into this process, and to the Kings County Family Preservation Support Board which acts as the Commission's technical advisory committee.

#### **EXECUTIVE SUMMARY**

#### of DRAFT STRATEGIC PLAN

Pursuant to Proposition 10, a voter Initiative passed in November 1998 which imposed a fifty-cent-per-pack state sales tax on tobacco, the Kings County Children and Families Commission was established on December 29, 1998. In compliance with that initiative the Commission has put together a comprehensive plan for promoting, supporting and improving early childhood development of children 0-5 in Kings County through coordinating resources and programs that emphasize family support, parent education, child care and development and child health. This plan was developed by a Strategic Planning Committee which was made up of 9 Commissioners, 12 providers of children and/or family services and 10 community representatives. This committee utilized information gathered through community forums, parent and provider surveys, service provider round table discussions, existing needs assessments and other input provided to, or gathered by, the Commission. The strategic plan which follows, which is based on community input, has the following ten key goals:

- 1. To improve the overall health of children 0-5.
- 2. The establishment of community family resource centers.
- 3. To provide low or no cost enrichment programs for children 0-5.
- 4. To empower communities to make positive differences in their own community.
- 5. To educate parents on issues related to early childhood development and available children and family services and programs.
- 6. To increase and expand preschool, day care centers and family day care homes serving children 0-5.
- 7. To increase the availability of transportation services for children and families to get to childcare an/or preschool.
- 8. To enhance the quality of daycare and early childhood education services.
- 9. To facilitate public and private partnerships to integrate and augment childcare and early childhood development services.
- 10. To ensure that all children enter kindergarten, healthy and equipped with the necessary social skills, literacy skills and other needed skills to succeed in school.

Each of these ten goals have been broken down into related objectives with proposed strategies for achieving those objectives. In addition each objective has a set of identified indicators and target outcomes in order to be able to track the Commission's success toward meeting these ten goals. These indicators will be utilized to report back to the Commission and the Kings County community with an annual report card on the status of children 0-5 in Kings County.

It is anticipated that Kings County will receive approximately two million dollars per year to fund this plan. It is the Commission's intention to use these funds to leverage other dollars needed to fully implement this plan in a timely and effective fashion.

#### **BACKGROUND**

Proposition 10, which was passed by California voters in November 1998, imposed a fifty-cent-per-pack state sales tax on tobacco to fund a comprehensive, integrated system of early childhood development services for California children ages 0 to 5. The overall intent of the initiative is to prepare all California children to enter school healthy and ready to learn. Revenues generated are intended to promote, support and improve early childhood development through coordinating resources and programs that emphasize family support, parent education, childcare and development and child health.

The focus of the proposition is early childhood development because current research indicates that the emotional, physical and intellectual environment that a child is exposed to in the early years of their life has a profound impact on how his or her brain develops. The experience that an infant and toddler has with parents and caregivers will influence how a child functions when he or she reaches school and later in life. Despite this research, currently most money spent on children's programs in California is directed at children older than five years of age. Proposition 10 provides the first significant pool of money strictly focused on the critical years of a child's development.

Eighty percent of the revenues collected will go to the County Commissions to fund local programs. The remaining twenty- percent will be used by the State Commission to implement statewide strategies. Funds are allocated to County Commissions based upon county birth rates as a percentage of the California totals. As the tobacco tax is the exclusive means of funding for these Commissions, the focus is to create sustainable programs for children that can continue even as funding decreases from the anticipated decline in tobacco sales as a result of Proposition 10.

Each county board of supervisors enacted an ordinance to establish the appointment, selection and removal of commissioners, and to establish a trust fund to receive and make disbursements. The Kings County Board of Supervisors enacted Ordinance No. 578 on December 29, 1998 to establish the Commission and subsequently appointed nine members to the Commission.

Proposition 10 directs County Commissions established pursuant to the initiative to formulate strategic plans. The reason for this is that local communities know best how to use resources to improve child health and well being in their own neighborhoods. The uniqueness of the strategic planning process required of the local County Commissions is that they are required to involve the public directly in creating these strategic plans. The plan must be based on extensive input from communities, including families, service providers and advocacy groups. The Commissions must utilize this input to outline in a plan how counties will use these new monies to develop comprehensive, integrated systems of support and services for all children, from prenatal to five years of age.

The Kings County Children and Families Commission conducted community forums in all nine of its communities, which are Armona, Avenal, Corcoran, Hanford, Home Garden, Kettleman City, Lemoore, Santa Rosa Rancheria, and Stratford, as well as

holding a special forum for special needs parents. Simultaneously with conducting community forums the Commission held a series of round table discussions, to which over 150 children and families service providers were invited to participate, and conducted parent surveys and provider surveys. Existing needs assessments and other available data on Kings County's children zero to five was also gathered. All of this information was compiled and provided to the Strategic Planning Committee. This committee consisted of 31 individuals—9 Commissioners, 12 service providers and 10 community representatives selected by their communities.

The Strategic Planning Committee completed their work on January 29, 2000, and the compilation of their hard work is set forth below and constitutes the Kings County Children and Families first annual strategic plan.

#### **VISION STATEMENT**

The Kings County Children and Families commission envisions that all Kings county families receive access to the tools, knowledge, and quality care necessary to encourage each child to develop to their fullest potential those life skills that will allow them to become successful members of our community.

#### MISSION STATEMENT

Providing all Kings County children the necessary building blocks to succeed in life.

#### GOALS, OBJECTIVES, STRATEGIES, INDICATORS AND OUTCOMES

Proposition 10 requires that the Commission's strategic plan for early childhood development in Kings County address three distinct areas which are set forth below. These three areas are based on the three strategic results or long-range outcomes that have been identified by the California Children and Families State Commission, which are 1) Improved Child Health: Healthy Children 2) Improved Family Functions: Strong Families; and 3) Improved Child Development: Children Learning and Ready for School. The emphasis is on comprehensive, integrated planning and service delivery in achieving these overarching improvements for children zero to five and their families. In order to accomplish this the plan is required to set forth goals, objectives, strategies, indicators and anticipated outcomes. These are set forth below and constitute the Kings County Children and Families Strategic Plan.

Child Health and Maternal Prenatal and Postnatal Health				
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES
1. To improve the overall health of children 0 – 5 in Kings County.	1. 1To increase residents' understanding of critical/important health issues in Kings County.	<ul> <li>Develop community-based permanent resource centers county-wide with accessible hours. These centers would be a vehicle for the dissemination of health related information.         Commission to contract for the development of a business plan to outline how a community resource center can be run cost effectively.</li> <li>Disseminate health information at health fairs.</li> <li>Commission to contract for development of health yellow pages/resource directory of all existing services in the area providing services to children and families.</li> <li>Commission to put together a marketing/media plan to</li> </ul>	1. 1. a Number of residents demonstrating understanding of critical/important health issues.	1.1.a Number of residents demonstrating an understanding of critical/important health issues will increase by 25% within five years as measured by appropriate existing or acquired data.

effectively educate public on
targeted health issues.
Develop and disseminate an
interactive health curriculum
to be included as a critical
component of all parent
education, early childhood
development training, CPSP,
prenatal/parenatal classes, and
community courses held at the
community resource centers.
Curriculum should include:
a) assertiveness, conflict
resolution and anger
management.
b) economic impact of failure
to complete education
c) immunizations
d) lead testing
e) prenatal, parenatal and
breastfeeding
f) environmental health issues
g) nutrition
h) preventative health
i) available programs (eg.
MediCal, CPSP, WIC,
Healthy Families, etc.)
j) smoking cessation
k) pre-pregnancy planning
1) ramifications of teen
-,

<ul> <li>Have where Depts inform</li> <li>Train identification babie neede</li> <li>Common Common Co</li></ul>	schools set up forums Health & Welfare will provide nation.  providers to be able to fy drug/alcohol affected and how to access d services.  nission to take the lead ocate AB246.
--	--

	Child Health and Maternal Prenatal and Postnatal Health				
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES	
1. To improve the overall health of children 0 – 5 in Kings County.	1.2 To address the following critical/important health issues by service providers: (a) healthier babies, (b) anemia, (c) blood lead levels, (d) teen pregnancy, (e) immunizations, (f) accidental death (g) reduction in drug and alcohol exposed babies at birth, and (h) breastfeeding.	<ul> <li>Conduct a needs assessment for methods for increasing local service including the use of telemedicine.</li> <li>Prepare a proposal to secure funding based on telemedicine needs assessment.</li> <li>To ensure that all children in Kings County receive fluoridated water. Health dept. shall identify areas needing fluoridated water and have personnel make presentations to local communities and leaders to get support for flouridation.</li> <li>Ensure early entry into comprehensive prenatal services for all pregnant women with early linkages to other services needed to promote long-term physical</li> </ul>	1.2.a Prevalence rates of critical/important health issues.	<ul> <li>1.2.a After 5 years, the number of low birth weight babies will decrease by 28% as measured by county health records.</li> <li>1.2.a After 5 years, the rate of infant mortality will decrease by 31% as measured by county health records.</li> <li>1.2.a After 5 years, all communities shall have fluoridated water as measured by county health records or other appropriate existing or acquired data.</li> <li>1.2.a After 5 years, the rate of anemia of children under the age of six will decrease by 25%</li> </ul>	

	T
and psychosocial well-being	as measured by county
(e.g. substance abuse, health	health records.
education, nutrition, social	
work, etc.)	1.2.a After 5 years, will
	eliminate the
Develop on subsuce expenses	occurrence of blood
Develop or enhance current	lead levels above
programs to ensure that all	
children are receiving	25mc/dL in children
immunizations at	under six years of age
recommended intervals.	as measured by
	county health records.
Develop creative and	
innovative community-based	1.2.a After 5 years, the rate
outreach efforts to ensure that	of teenage
	pregnancies will
children and families are fully	decrease by 30% as
utilizing the benefits of all	
existing health services and	measured by county
health insurance programs	health records.
such as Healthy Families,	
CHDP, California Kids,	1.2.a After 5 years the
Migrant Ed., Medi-Cal, WIC,	immunization level of
AIM, etc.	two year olds will be
711171, CIC.	90% or better as
	measured by county
Develop or enhance	health records.
environmental health services	nearm records.
that target reduction in	
accidental death among	1.2.a After 5 years the rate
children under six.	of accidental deaths of
Children Gilder Silvi	children under six
TT.'1' 1'C' 1 (CD13 # 2)	years of age will
Utilize a modified "El Myra"	decrease by 15% as

home visitation model for identified "at risk" pregnant women.  • Tobacco cessation programs targeted to expectant parents and parents of young children.  • Innovative and creative community-based programs to reduce the rate of teen pregnancy.  • Increase services for drug, alcohol and mental health.  • All children 0 – 5 to be tested for lead poisoning, with follow-up to address root cause of those positively	measured by county health records.  1.2.a After 5 years, will decrease by 25% the rate of drug and alcohol exposed babies as measured by county health records.  1.2.a After 5 years, will increase by 25% the rate of mothers breastfeeding as measured by county health records.
for lead poisoning, with follow-up to address root	

	Child Health and Maternal Prenatal and Postnatal Health				
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES	
1. To improve the overall health of children 0 – 5 in Kings County.	1.3 To increase access to health services that are affordable, convenient, efficient, expedient, and culturally and linguistically appropriate manner for children 0 – 5 and pregnant women.	<ul> <li>Provide outreach and assistance with eligibility to ensure full utilization of existing programs such as MediCal, Healthy Families, California Kids, CPSP, etc.</li> <li>Commission to appoint an adhoc committee to explore methods of eliminating financial barriers that prevent access to medical services.</li> </ul>	1.3.a Level of access to needed health services that are affordable, convenient, efficient, expedient, and culturally and linguistically appropriate.	1.3.a The level of access to affordable, convenient, efficient, expedient, and culturally and linguistically appropriate will increase by 25% within five years as measured by appropriate existing or acquired data.	
		<ul> <li>Commission to appoint an adhoc committee to explore barriers that prevent access to needed drug, alcohol and mental health services.</li> <li>Commission to appoint an adhoc committee to explore the gaps and needs in transportation, as it relates to receiving adequate medical</li> </ul>		1.3.a Within five years the rate of utilization of existing health services and insurance programs by eligible participants will increase by 100%.	

	care, and to propose a plan to address those needs.	
	• Eliminate barriers to pregnant women receiving prenatal care.	
	• Explore methods of eliminating financial barriers to medical care.	

	Child Health and Maternal Prenatal and Postnatal Health				
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES	
1. To improve the overall health of children 0 – 5 in Kings County.	1.4 To increase the level of health services to children and families in Kings County that are truly integrated, comprehensive and consumer oriented through coordination and collaboration between service	Commission to appoint an adhoc committee to formulate, design and establish a forum of children and families service providers whose goal shall be to establish true coordination and collaboration to ensure an integrated, non-duplicative, comprehensive and consumer-	1.4.a Level of coordination and collaboration among service providers.	1.4.a The level of coordination and collaboration among service providers will increase by 10 % each year as measured by appropriate existing or acquired data.	
	providers.	oriented system of services for Kings County children 0 – 5 and their families.	1.4.a Level of integrated, comprehensive and consumer oriented health services.	1.4.a The level of integrated, comprehensive and consumer oriented health services will increase by 10% each year as measured by appropriate existing or acquired data.	

Child Health and Maternal Prenatal and Postnatal Health				
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES
1. To improve the overall health of children 0 – 5 in Kings County.	1.5 To provide sufficient health services needed for the attainment of the state of wellness for children 0 – 5 and pregnant women.	<ul> <li>Ensure proper follow-up for children with disabilities.         Commission to establish an adhoc committee to determine who is responsible for follow-up.</li> <li>Ensure access to pre-pregnancy counseling and contraceptive methods.</li> <li>Commission to take lead in the recruitment of needed children's health specialists into Kings County.</li> <li>Assure that all newborns receive hearing testing.</li> <li>Commission to appoint adhoc committee to draft a plan to meet the need for increased drug, alcohol and mental health services county-wide.</li> </ul>	1.5.a Level of wellness for children 0 – 5 and pregnant women.	1.5.a The level of wellness of children 0 – 5 and pregnant women increase by 25% after five years as measured by appropriate existing or acquired data

<ul> <li>To provide a community home visitor to first time mothers.</li> <li>Health Dept. to provide service providers a book on the scope of existing health services and health insurance programs along with training on how to access services to ensure that providers are referring patients to needed services and programs.</li> <li>To provide mobile health services for preventative and basic health services needed to ensure that all communities in kings county have local health care services for children 0 – 5 including child health, vision, dental, and hearing.</li> </ul>
<ul> <li>Conduct a needs assessment         of illnesses utilizing Kings         County's Community Health         Status Report as a starting         point and develop a plan to         provide the needed services to</li> </ul>

	positively impact identified areas.  • Ensure earlier detection of missed early childhood developmental milestones with appropriate follow-up and referrals to beneficial services.	

	Pare	ent Support Services and P	arent Education	
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES
2. To establish aesthetically pleasing multipurpose community resource centers, in each of Kings County's communities, with community ownership and involvement which are culturally and ethnically reflective of that community.	2.1 To provide parents with support services at accessible hours.	<ul> <li>To provide parents support services at accessible hours in the following areas:</li> <li>a) education about child rearing, including special needs specific</li> <li>b) health and safety issues</li> <li>c) access to a comprehensive team of specialists concerning child development issues</li> <li>d) linkages to needed support services</li> <li>e) equipment lending programs for special needs children</li> <li>f) childcare</li> <li>g) preschool &amp; literacy programs for 0 - 5</li> <li>h) mentoring</li> <li>i) enrichment opportunities at low or no cost for young children</li> <li>j) assistance with issues that put them "at risk" such as homelessness, unemployment, hunger, lack of education, illiteracy, citizenship, etc.</li> </ul>	2.1.a Level of accessible support services.	2.1.a The level of accessible support services will increase by 10 % each year as measured by appropriate existing or acquired data.

k) parent peer support groups l) child abuse
<ul> <li>Expand existing services to children to include parent education and support services.</li> </ul>
To utilize collaborative and cooperative methods to establish effective community resource centers and related services.
Utilize active community involvement to design, run and sustain the center.
<ul> <li>Conduct needs assessments in local communities to identify gaps, needs and assets and develop a systematic plan for addressing how the resource center can play a role in addressing the outcomes of such assessments.</li> </ul>

	Pare	ent Support Services and P	arent Education	
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES
3. To provide asset and enrichment based programs targeted at children 0 – 5 that are low or no cost in all of Kings County's communities.	3.1 To provide readily available low or no cost services that enrich and nurture cultural sensitivity, awareness and preservation among children 0 – 5.	<ul> <li>Enhance programs based on assets and enrichment that that create an atmosphere of belonging and acceptance.</li> <li>Conduct community forums, in-service training and celebrations, on the issue of cultural awareness and sensitivity.</li> <li>Use cultural liaisons and advocates.</li> <li>Fund creative and innovative community based programs.</li> <li>Fund children's literacy programs targeted at children 0 – 5.</li> </ul>	3.1.a Level of culturally enriching and nurturing services.	3.1.a The level of culturally enriching and nurturing services will increase by 15% within years as measured by appropriate existing or acquired data.

Parent Support Services and Parent Education						
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
4. To empower communities to make positive differences in their own community to improve the lives of children and families.	4.1 To increase community organizing and empowerment activities.	<ul> <li>Assist communities to organize. Contract for services to facilitate community organizing in those communities desiring assistance.</li> <li>Educate communities on the impact of various governmental agencies to provide needed and ongoing services.</li> <li>Provide help with obtaining grants to assist communities with their strategic plan's for positive change in their communities.</li> <li>Utilize community resource center as a focal point for community organizing and outreach to the community.</li> </ul>	4.1.a Number of community organizing and empowerment activities.	4.1.a Within five years all communities in Kings County will have commenced community organizing and empowerment activities as measured by appropriate existing or acquired data.		

	Pare	ent Support Services and P	arent Education	
GOALS 5. To educate	OBJECTIVES 5.1 To provide effective,	STRATEGIES  • To ensure that the State	INDICATORS 5.1.a Level of effectiveness	OUTCOMES 5.1.a The level of
parents on issues related to early childhood development and existing children and families resources available to Kings County children and families.	quality education on early childhood development including education about existing children and families resources available to Kings County children and families.	<ul> <li>To ensure that the State         Commission's well baby kits         distributed in Kings County         include sufficient information         on early childhood         development and include a         resource directory of available         children and families         resources to Kings County.</li> <li>Define quality childcare and         develop materials that         show/define quality care and         provide to parents and use as         a resource tool to educate         parents about quality         childcare.</li> <li>Educate parents on nutrition         and health and         safety.residents.</li> <li>To include information about         early childhood development</li> </ul>	and quality of early childhood development education.	effectiveness and quality of early childhood development education provided to Kings County parents will increase by 50% within five years as measured by appropriate existing or acquired data.

early childhood development and existing children and families resources available to Kings County children and families in every prenatal class in Kings County.
Put together a packet of information on early childhood development, and a resource directory of children and families services in the area, and work with the local hospitals and Public health Dept to distribute in prenatal classes at time of birth.
Develop services with Public Health and/or hospitals with combined resources for a holistic approach.
Participate in medical association meetings.
Invite medical providers to serve on local child related services and committees.
Distribute information packets

on available services for waiting rooms and patient rooms that are multi-lingual.
Distribute the I AM YOUR     CHILD "Quality Child Care:     Making The Right Choice For     You & Your Child" video     tapes to doctor's offices.
Distribute I AM YOUR     CHILD video to parents     through clinics, hospitals,     workshops, etc.
Provide the local Parents     newsletter to agencies for     distribution.
Establish a call in center     where parents can find out     about where to go for needed     services/info./education.

Childcare and Early Learning Opportunities for Children						
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
6. To increase and expand preschool, day care centers and family day care homes serving children 0 – 5, as needed to meet the needs of all of Kings County's communities.	6.1 To develop a sick child care services strategy.	<ul> <li>To identify possible providers.</li> <li>To work with hospitals and public health depts.</li> <li>To provide resources for the development of services to care for sick children.</li> <li>Examine provider services for networking when unable to care for children.</li> </ul>	6.1.a A sick child care services strategy.	6.1.a By the end of the second program year, a sick child care services strategy will have been developed.		

	Childcar	e and Early Learning Oppor	tunities for Children	
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES
6. To increase and expand preschool, day care centers and family day care homes serving children 0 – 5, as needed to meet the needs of all of Kings County's communities.	6.2 Increase infant care, non-traditional hours care, special needs care and preschool opportunities.	<ul> <li>Provide infant and special needs care training.</li> <li>Provide incentives to provide needed services for infant care, special needs care and/or non-traditional hours of care.</li> <li>Provide resources needed to provide infant and/or special needs care.</li> <li>Develop workshops on special needs childcare.</li> <li>Provide financial assistance.</li> <li>Fully utilize existing preschool resources, and look for additional resources to ensure access to preschool for all children before entrance to kindergarten.</li> </ul>	6.2.a Level of infant care, non-traditional hours care, special needs care and preschool opportunities.	6.2.a Level of infant care non-traditional hours care, special needs care and preschool opportunities will increase by 20% within five years as measured by appropriate existing or acquired data.

	Childcar	re and Early Learning Oppo	rtunities for Children	
GOALS  6. To increase and expand preschool, day care centers and family day care homes serving	OBJECTIVES  6.3 To increase the availability of subsidized services.	<ul> <li>STRATEGIES</li> <li>Identify what is available in subsidized childcare.</li> <li>Identify existing services in all areas and integrate services.</li> </ul>	INDICATORS  6.3.a Level of available subsidized child care services.	OUTCOMES  6.3.a Level of available subsidized childcare services will increase by 15% within five years as measured by appropriate existing or acquired data.
children 0 – 5, as needed to meet the needs of all of Kings County's communities.		<ul> <li>Application process for additional subsidies/block grants.</li> <li>Pursue pilot projects.</li> <li>Utilize Local Child Care Council's childcare coordinator.</li> <li>Approach legislators for assistance.</li> </ul>		

Childcare and Early Learning Opportunities for Children						
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
6. To increase and expand preschool, day care centers and family day care homes serving children 0 – 5, as needed to meet the needs of all of Kings County's communities.	6.4 To increase the number of qualified service providers.	<ul> <li>Provide ongoing support to centers and staff.</li> <li>Provide classes on "how to" start a daycare/preschool business on evenings in appropriate languages.</li> <li>Provide small stipends or mini grants to meet home licensing standards.</li> <li>Provide on going support to centers and staff and providers.</li> <li>Help support liability insurance.</li> <li>Increase communication to potential providers.</li> <li>Increase the image of being a provider.</li> </ul>	6.4.a Number of qualified service providers.	6.4.a Number of qualified providers will increase by 20% within five years as measured by appropriate existing or acquired data.		

Provide food assistance for nutritious meals for those not qualifying for State subsidies.	

Childcare and Early Learning Opportunities for Children					
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES	
7. To increase the availability of transportatio n services for children and families to get to childcare and/or preschool.	7.1 To increase the attendance at KART public hearings by the general public.	<ul> <li>Commission to ask for special meeting in the evening at a childcare facility or other appropriate spot to address needs to the KART Board.</li> <li>Commission to identify transportation needs and submit/present needs report at public hearings.</li> <li>Distribute fliers /advertise in the newspaper about hearings.</li> <li>Get community leaders to get people to come to the public hearings.</li> <li>Circulate petitions for signature.</li> <li>Educate parents and providers about special needs care.</li> </ul>	7.1.a Level of public attendance.	7.1.a Increase of attendance by 10% each year at KART public hearings by the general public measured by attendance rolls taken during the second and subsequent program years.	

Childcare and Early Learning Opportunities for Children					
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES	
7. To increase the availability of transportatio n services for children and families to get to childcare and/or preschool.	7.2 To increase publicity of transportation services.	Obtain and disseminate KART schedules in appropriate languages.	7.2.a Level of knowledge of general public about existing transportation services.	7.2.a Level of knowledge of the general public about transportation services will increase by 10% each year as measured by appropriate existing or acquired data.	

	Childcare and Early Learning Opportunities for Children					
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
7. To increase the availability of transportatio n services for children and families to get to childcare and/or preschool.	7.3 To investigate alternative transportation services.	<ul> <li>Conduct an agency to agency survey of transportation needs and develop a plan.</li> <li>Examine liability insurance issues which prohibit providers from providing transportation (i.e. State umbrella policy).</li> <li>Provide providers with funds/incentives to providing transportation.</li> </ul>	7.3.a Alternative transportation services explored.	7.3.a By the end of the third program year, a report on alternative transportation services will have been submitted to the Commission.		

Childcare and Early Learning Opportunities for Children					
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES	
8. To enhance the quality of daycare and early childhood education services in Kings County.	8.1 To increase the number of providers pursuing continuing education and training.	<ul> <li>Provide continuing training and education opportunities for early childhood educators and childcare providers.</li> <li>Offer incentives for pursuing continued education and training.</li> <li>Target outreach to home providers to educate family day care homes.</li> <li>To encourage accreditation of childcare providers/facilities.</li> <li>Identify educational opportunities for providers and their staff.</li> <li>Fund outreach worker(s)/mentor(s) (i.e. family advocate) to visit</li> </ul>	8.1.a Number of providers pursuing continuing education and training.	8.1.a Within five years the number of providers pursuing continuing education and training will increase by 50% as measured by appropriate existing or acquired data.	

providers.
Enhance existing education and training programs.
Create new educational opportunities as needed.
Local Child Care Planning     Council to recruit     participation.
Create a certification as an incentive.
Provide stipends and tuition assistance.
Distribute information packets/resource directory and videos to providers.
Develop a mobile team to go to homes.
Work with businesses to create incentives.

	Childcare and Early Learning Opportunities for Children						
	GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
6 8	To enhance the quality of daycare and early childhood education services in Kings County.	8.2 To increase the number of accredited service providers	<ul> <li>To encourage accreditation of childcare providers/facilities.</li> <li>Provide providers an incentive to become accredited.</li> <li>Provide assistance to the provider through the process of accreditation.</li> <li>Publicize accreditation incentives and process assistance.</li> <li>Provide recognition to accredited providers.</li> </ul>	8.2. Number of accredited service providers.	8.2.a By the end of the fifth program year, the number of accredited service providers will increase by 25% as measured by appropriate existing or acquired data		

Childcare and Early Learning Opportunities for Children						
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
9. To facilitate public and private partnerships to integrate and augment childcare and early childhood development services in Kings County.	9.1 To increase wraparound services for working parents.	<ul> <li>Identify existing programs, including schools and those serving special needs.</li> <li>Use Local Child Care Planning Council as the clearing house to bring service providers together.</li> <li>Research collaboration grants for partners.</li> </ul>	9.1.a Number of community provided wrap-around services.	9.1.a Will be an increase of 10% in the number of wrap-around services for working parents by the end of the first program year as measured by appropriate existing or acquired data.		

	Childcare and Early Learning Opportunities for Children					
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
9. To facilitate public and private partnerships to integrate and augment childcare and early childhood development services in Kings County.	9.2 To increase the utilization of foster grandparent programs in childcare and early childhood education programs.	<ul> <li>Identify regulations concerning the use of foster grandparents in childcare/early education programs.</li> <li>Utilize existing foster grandparent services which would benefit early childhood education programs.</li> <li>Provide means/resources for expanding existing foster grandparent programs which would benefit early childhood education programs.</li> </ul>	9.2.a Level of utilization of foster grandparent programs in child care and early childhood education programs.	9.2.a Level of utilization of foster grandparent programs in childcare and early childhood education programs will increase by 10% during the first two program years as measured by appropriate existing or acquired data.		

	Childcare and Early Learning Opportunities for Children					
GOALS	OBJECTIVES	STRATEGIES	INDICATORS	OUTCOMES		
10. To ensure that all children enter kindergarten, healthy and equipped with the necessary social skills, literacy skills and other needed skills to succeed in school.	10.1 To increase the number of children entering kindergarten at readiness level.	<ul> <li>Promote access to preschool for all pre-K children.</li> <li>Support expansion of family literacy programs.</li> <li>Expand family literacy or preschool model to home-based family day care.</li> <li>Support library based parent/child programs.</li> <li>Ensure all kids fully immunized, have had regular preventative care and have had early assessment of developmental delays with appropriate follow-up treatment prior to entry into kindergarten.</li> </ul>	<ul> <li>10.1.a Number of children performing at grade level by third grade.</li> <li>10.1.b Number of children entering kindergarten deemed at readiness level by kindergarten teachers.</li> </ul>	10.1.a After 5 years, the number of children performing at grade level by third grade will increase by 10% as measured by the results of standardized tests used by the schools pursuant to State requirements.  10.1.b After 5 years, the number of children entering kindergarten deemed at readiness level by kindergarten teachers will increase by 10% as measured by appropriate existing or acquired data.		
		To promote preschool evaluation and accountability	10.1.c Number of children participating in	10.1c After 5 years, the		

	with parent/teacher	preschool programs.	number of children
	conferences and other parent		participating in
	feedback on the progress of		preschool programs
	each child and their		will increase by 10%
	preparedness to enter		as measured by
	kindergarten.		appropriate existing or
			acquired data.
		10.1.d Number of children participating in literacy programs.	10.1.d After 5 years, the number of children participating in literacy programs will increase by 10% as measured by appropriate existing or acquired data.
		10.1.e Number of children entering kindergarten with basic health, dental, and nutritional needs met.	10.1.e After 5 years, the number of children entering kindergarten with basic health, dental, and nutritional needs met will increase by 25% as measured by appropriate existing or acquired data.

## INTEGRATION INTO A CONSUMER-ORIENTED AND EASILY ACCESSIBLE SYSTEM

A key component of the Commission's strategic plan is the integration of services and programs which serve children 0-5 and their families into a consumer-oriented and easily accessible system. The primary tools which will be used by the Commission to achieve this is through adhoc committees appointed by the Commission to address these issues as well as through the input and assistance of the community resource centers to be established. The community resource centers are seen as the clearing house for access at the local level to information and services needed.

Funding will be linked to those programs which can demonstrate collaboration, coordination, integration of services, accessibility and have a consumer-oriented approach and are not duplicative of services already available in that particular community.

#### **EVALUATION**

In order to ensure that evaluation data accurately reflects the tangible impact of funded projects towards achieving the goals, objectives and anticipated outcome set forth in the Commission's Strategic Plan, the Commission has determined that it would be best to hire an outside consultant. This consultant, such as an University with experience in this field, would be responsible for ongoing comprehensive evaluation of all of those programs/services funded by the Commission, and to track the effect of the Proposition 10 Commission's work towards making a positive difference in the lives of Kings County's youngest children and their families.

Central to the evaluation component of the Commission's plan is the production of an annual report card on the status of Kings County's children 0-5 and what results the Commission has achieved in improving the lives of this population. This report card will provide a starting point for reanalyzing the strategic plan on an annual basis. It will, over time, clearly show which areas in which the efforts of the Commission are being successful and which are not, including in which communities it is realizing success and which it is not. This will provide the Commission guidance to continually improve the ability of the Commission to improve the health and well being of all of the children, families and communities it serves.

#### **ALLOCATING FUNDS**

Commission funds will not be used to supplant current expenditures, but rather to supplement, enhance or to fund new programs, services and infrastructure needed to create a consumer friendly, comprehensive, and integrated system of early childhood development programs. To the maximum extent possible Proposition 10 funds will be used as leverage to obtain other resources needed to meet the goals and objectives of the strategic plan. Funding shall be based on priorities set by the Commission, which shall take into account the need to 1) address the needs of the children in all of Kings County's communities; 2) the need to keep administrative costs to a minimum; 3) the need to fund

a quality evaluation component; 4) the need for an organized and professional media campaign; 5) the need to distribute funding evenly across the program components and priorities; 6) the need to create a level playing field amongst applicants for funding; 7) the need to fund projects which will support the goals and objectives of the strategic plan; 8) the need to fund projects which show evidence of effectiveness in addressing the goals and objectives of the strategic plan; 9) fund projects which clearly need funding from the Commission; 10) the need to move toward service integration, accessibility, collaboration and comprehensive services; 11) the need to fund projects which are responsive to the diverse needs of the children and families in this County; 12) the need to fund projects which are supported by community input; and 13) the need to fund projects that will build on community strengths, will build capacity and will reap long-term benefits to the children and families in each of Kings County's communities including meeting the special needs population in this County.

The Commission will utilize a combination of funding mechanisms to achieve its goals and objectives set forth in the strategic plan. These will be Request for Proposals, Minigrants, Contracts for Service and direct delivery of services where appropriate.